



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6408

|   |   |                                |   |                                       |
|---|---|--------------------------------|---|---------------------------------------|
| <b>SERIAL NUMBER</b><br>09/755,383  | <b>FILING DATE</b><br>01/05/2001<br><b>RULE</b>   | <b>CLASS</b><br>345            | <b>GROUP ART UNIT</b><br>2673   | <b>ATTORNEY DOCKET NO.</b><br>IMM029B |
| <b>APPLICANTS</b><br>Bruce M. Schena, Menlo Park, CA;<br>Louis B. Rosenberg, Pleasanton, CA;  |   |                                |   |                                       |
| <b>** CONTINUING DATA *****</b><br>THIS APPLICATION IS A CON OF 09/401,044 09/22/1999 PAT 6,191,774<br>WHICH IS A CON OF 08/881,691 06/24/1997 PAT 6,100,874<br>WHICH IS A CIP OF 08/560,091 11/17/1995 PAT 5,805,140<br>AND A CIP OF 08/756,745 11/26/1996 PAT 5,825,308 |   |                                |   |                                       |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                                |   |                                       |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/26/2001</b>  |   |                                |   |                                       |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance                          |   | <b>STATE OR COUNTRY</b><br>CA  | <b>SHEETS DRAWING</b><br>23   | <b>TOTAL CLAIMS</b><br>30             |
| Verified and Acknowledged<br>Examiner's Signature: _____ Initials: _____  |   | <b>INDEPENDENT CLAIMS</b><br>3 |   |                                       |
| <b>ADDRESS</b><br>Paul L. Hickman<br>HICKMAN COLEMAN & HUGHES LLP<br>P. O. Box 52037<br>Palo Alto, CA 94303-0746  |   |                                |   |                                       |
| <b>TITLE</b><br>Force feedback interface device with touchpad sensor  |   |                                |   |                                       |
| <b>FILING FEE RECEIVED</b><br>890   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                       |



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35 USC 119 (a-d) conditions met  
☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged  
Examiner's Signature: [Signature] Initials: [Initials]

**ADDRESS**  
Phil Albert Esq  
Townsend and Townsend  
Two Embarcadero Center 8th Floor  
San Francisco, CA 94111

**TITLE**  
Force feedback interface device with touchpad sensor

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